FOR INSTRUCTIONS, SEE BACK OF FORM

File with:

Iowa Ethics and Campaign Disclosure Board 510 E. 12<sup>th</sup>, Ste. 1A Des Moines, Iowa 50319 Fax: 515-281-4073

# **DISCLOSURE SUMMARY PAGE**

Effective January 1, 2010, all statements and reports filed by new committees for state office must be filed electronically and effective January 1, 2012, all statements and reports filed by all committees for state office must be filed

Effective May 1, 2010, all statements and reports for State PACs and State Parties must be filed electronically.

Reset Form

	The same of the sa	- Contraction		
COMMITTEE NAME (Must be same as on Statement of Orga	anization)		FORM	
TWEDT FOR TREASURER			FORM	
IMPORTANT: Indicate by # type of committee you are reporting for: (1) Statewide/Legislative/Judge Standing for Retention Candidate (4) County Central Committee (5) County Candidate (6) City Cand Subdivision Candidate (8) County PAC (9) City PAC (10) School 11) Local Ballot Issue	2 )State PAC (3 )State Party idate (7 )School Board or Other Political	( <u>E</u>	DR-2 Rev. 12/2009) For Office Use On	DISCLOSURE REPORT
CANDIDATE COMMITTEES ONLY:				
Candidate Name RENEE TWEDT	Political Party (if applicable) REPUBLICAN	8	Scanned	
Office Sought COUNTY TREASURER - STROY COUNT	District (if Senate or House)			
Late reports are subject to possible civil and criminal penalties. Pu candidate's committee, and the chairperson, for any other type of				
	515-382-5481		dialia	
SIGNATURE OF PERSON FILING REPORT	TELEPHONE	_	DATES	IGNED
		- Alberto 24 il		
I AM FILING A JAN 19T, 2012	REPORT FOR (1) ELECTION	/(2)NON	-ELECTION YE	AR.
(report date)	Indicate by			
CHECK IF AMENDMENT TO REPORT DATED		Local Cor	nmittees, enter Da	ite of Election
☐ Check if this is final (termination) report and attach Notice (You must continue to file reports until a DR-3 is filed			Local Committees ection is held Y	s, enter County In
STATEMENT OF CASH ON HAN	D			The second second
CASH ON HAND at the beginning of the reporting period. (To	otal of all funds held by the			
committee. This amount MUST be the same as the of the last reporting period or must be zero if this is f	cash on hand at the end	\$	675.10	
ADD TOTAL MONEY TAKEN IN THIS PERIOD				
Schedule A: Cash Contributions total (Attach Sched	dule A) (*also see in-kind below)	*******	1,720.00	
Schedule F: Loans Received total (Attach Schedule	F)			
Schedule H: Total Sales of Campaign Property (Atta	ach Schedule H)			
(Schedule H applies to Candidates' Com	mittees Only)			
	SUB-TOTAL	\$	2,395.10	
SUBTRACT TOTAL MONEY SPENT THIS PERIOD				
Schedule B: Expenditures total (Attach Schedule B)	(**also see debts and loans below).	*********	2,292.80	
Schedule F: Loan Repayments total (Attach Schedu	ıle F)			
CASH ON HAND at the end of this reporting period (if final re	port balance must be zero)	\$	102.30	
**UNPAID BILLS (From Schedule D - Attach Schedule D)		\$	Charles and the second section	NAME OF THE OWNER O
*IN KIND CONTRIBUTIONS (From Schedule E - Attach Sche				
**OUTSTANDING LOANS (From Schedule F - Attach Schedu				
CONSULTANT BREAKDOWN (Schedule G Attached?)	#####################################		YES	NO
CANDIDATE COMMITTEES ONLY:		-		5
VALUE OF CAMPAIGN PROPERTY (From Schedule H - Atta	ach Schedule H)	\$		
STATE COMMITTEES: Submit a reconciled campaign accou				

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### **EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT**

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
	CK THIS BOX IF

COMMITTEE	NAME (Must be s	ame as on Statement of Organization)	
TWEDT FO	R TREASURER		
DATE	CANDIDATE ID NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE	PL (DESCRIBE

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
02/22/2011	ID# CK#1003	INTEGRATED PRINT SOLUTIONS BOX 1863 AMES, IA 50010	YARDSIGNS/SHIPPING	\$ 2207.20
	ID#			
	CK#			
	ID#			
	CK#			
	ID#			
	CK#			
	ID#			
	CK#			
	ID#			
	CK#			
	ID#			
	CK#			
-	ID#			
	CK#			
			SUB-TOTA	AL \$ 2207.20

TOTAL (if last page of this schedule)

\$ 2207.20

#### THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 68A.402(3)(i).)

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## CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)
TWEDT FOR TREASURER

	SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
	CHECK THIS BOX IF AMENDING FORM	

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STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

**CAUTION:** Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
	ID#				INCOME
02/17/2011	CK#	RENEE TWEDT 12447 GEORGE W CARVER STORY CITY, IA 50248	CANDIDATE	\$1550.00	
	ID#	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
04/15/2011	CK#	JON AUGUSTUS 3028 COTTONTAIL LN AMES, IA 50014	NONE	110.00	
	ID#	AMES, 1A 30014			
09/08/2011	CK#	RENEE TWEDT 12447 GEROGE W CARVER STORY CITY, IA 50248	CANDIDATE	60.00	
	ID#				
	CK#				
	ID#				
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	ID#				
CK#	CK#				
	ID#		-		
	CK#				
	ID#				
	CK#				
			SUB-TOTAL	s 1720.00	

\* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 1 of 1 (for Schedule A)

1720.00

TOTAL (if last page of this schedule)